

Declaration Form

In Accordance with Foreign Account Tax Compliance Act ("FATCA") & Common Reporting Standards ("CRS")

For Individuals

To NKGSB CO-OP.Bank LTD.

Customer ID: _____

Applicant information			
Parameter	Primary Holder	Joint Holder 1	Joint Holder 2
Name of the Account Holder			
Passport No.			
Passport Issuing Country			
Passport Expiry Date			
Person from United States of America (Yes/No)			
Note: 1) In case Person from United States of America is "Yes", TIN details are mandatory. 2) If Person from United States of America is "No" fill 'United States Indicia'.			
TIN			
Tax Identification No.			
United States Indicia			
Country of Birth is United States of America? (Yes/No)			
Communication/permanent address is of United States Of America ? If 'Yes' then mention the United States Address.			
Country of residence for tax purpose is United States ? If 'Yes' then mention the United States Address.			
Identification Number (If available)			
Green Card Holder			
Country Code			
Area Code			
Phone Number			
Citizenship/Nationality:(If more than one, Please include below)			
Country 1+TIN			
Country 2+TIN			
Country 3+TIN			

Note:1) In case any of the parameter in United States Indicia is 'Yes', TIN details should be captured else self-certification to be taken. 2) In case 'Country of Birth is United States.' is 'Yes', Relinquishment of citizenship should be collected else self-certification to be taken.

Self-Certification

I confirm that I am not a United States person, though one or more parameters suggest my relation with the United States of America. Therefore, I am providing the following document as proof of my citizenship other than United States.

Signature

Signature

Signature

Document Proof submitted

Acceptable Documents: Passport Election Id Card PAN Card ID Card Driving License UIDAI Letter

NREGA Job Card

Customer Declaration

(i) I/we certify Under penalty of perjury that: The applicant is (i) an applicant taxable as a United State person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the United States.

(ii) an estate the income of which is subject to United States. federal income tax regardless of the source thereof. (This clause is not applicable only if the account holder is identified as a United States person)

(ii) I/We understand that the Bank is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA.

(iii)The Bank is not liable to offer any tax advice on FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(iv) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

(v) I/We agree that as may be required by domestic regulators/tax authorities the Bank may also be required to report, reportable details to CDBT or close or suspend my account.

(vi) I/We certify that the information I/we provide on this form is to the best of my/our knowledge and belief and the certification is true, correct, and complete including the taxpayer identification number of the applicant.

	Primary Holder	Joint Holder 1	Joint Holder 2
Signature			
Name			
Date (DD/MM/YYYY) :			